

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
Hanger Orthopedic Group Inc. PAC

ADDRESS (number and street) 2 Bethesda Metro Center, Ste 1200  
 Check if different than previously reported. (ACC)  
Bethesda MD 20814

2. **FEC IDENTIFICATION NUMBER** C00430397  
3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report(Q1)  
 July 15 Quarterly Report(Q2)  
 October 15 Quarterly Report(Q3)  
 January 31 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12G)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post -Election** Report for the:  General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 01 01 2007 through 06 30 2007

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Type or Print Name of Treasurer Hai Tran  
Signature of Treasurer Electronically Filed by Hai Tran Date 07 25 2007

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
Hanger Orthopedic Group Inc. PAC

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date										
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7	<table border="1" style="width: 100%; height: 20px;"><tr><td> </td></tr></table>		<table border="1" style="width: 100%; height: 20px;"><tr><td align="right">0.00</td></tr></table>	0.00
Y	Y	Y	Y									
2	0	0	7									
0.00												
(b) Cash on Hand at Beginning of Reporting Period .....	<table border="1" style="width: 100%; height: 20px;"><tr><td align="right">0.00</td></tr></table>	0.00										
0.00												
(c) Total Receipts (from Line 19) .....	<table border="1" style="width: 100%; height: 20px;"><tr><td align="right">27791.53</td></tr></table>	27791.53	<table border="1" style="width: 100%; height: 20px;"><tr><td align="right">27791.53</td></tr></table>	27791.53								
27791.53												
27791.53												
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	<table border="1" style="width: 100%; height: 20px;"><tr><td align="right">27791.53</td></tr></table>	27791.53	<table border="1" style="width: 100%; height: 20px;"><tr><td align="right">27791.53</td></tr></table>	27791.53								
27791.53												
27791.53												
7. Total Disbursements (from Line 31) .....	<table border="1" style="width: 100%; height: 20px;"><tr><td align="right">4781.00</td></tr></table>	4781.00	<table border="1" style="width: 100%; height: 20px;"><tr><td align="right">4781.00</td></tr></table>	4781.00								
4781.00												
4781.00												
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<table border="1" style="width: 100%; height: 20px;"><tr><td align="right">23010.53</td></tr></table>	23010.53	<table border="1" style="width: 100%; height: 20px;"><tr><td align="right">23010.53</td></tr></table>	23010.53								
23010.53												
23010.53												
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	<table border="1" style="width: 100%; height: 20px;"><tr><td align="right">0.00</td></tr></table>	0.00										
0.00												
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	<table border="1" style="width: 100%; height: 20px;"><tr><td align="right">0.00</td></tr></table>	0.00										
0.00												

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
Hanger Orthopedic Group Inc. PAC

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	23115.00	23115.00
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	4498.00	4498.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	27613.00	27613.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	27613.00	27613.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	178.53	178.53
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	27791.53	27791.53
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	27791.53	27791.53

**DETAILED SUMMARY PAGE**  
of Disbursements

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	81.00	81.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	81.00	81.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	4200.00	4200.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	500.00	500.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	4781.00	4781.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	4781.00	4781.00

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	27613.00	27613.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	27613.00	27613.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	81.00	81.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	81.00	81.00

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

**A.** Full Name (Last, First, Middle Initial)  
Jean Ann Bailey

Mailing Address 516 Kings Ridge

City State Zip Code  
Liberty MO 64068

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group Inc.

Occupation  
Associate Market Leader

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
50.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 02 / 2007

**Transaction ID:** 70709.C113

Amount of Each Receipt this Period  
50.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Jean Ann Bailey

Mailing Address 516 Kings Ridge

City State Zip Code  
Liberty MO 64068

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group Inc.

Occupation  
Associate Market Leader

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
100.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 16 / 2007

**Transaction ID:** 70709.C194

Amount of Each Receipt this Period  
50.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Jean Ann Bailey

Mailing Address 516 Kings Ridge

City State Zip Code  
Liberty MO 64068

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group Inc.

Occupation  
Associate Market Leader

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
150.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 30 / 2007

**Transaction ID:** 70709.C274

Amount of Each Receipt this Period  
50.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	150.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 102
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

Full Name (Last, First, Middle Initial) A. Jean Ann Bailey		Date of Receipt MM / DD / YYYY 04 / 13 / 2007
Mailing Address 516 Kings Ridge		Transaction ID: 70709.C354
City State Zip Code Liberty MO 64068		Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Hanger Orthopedic Group Inc.	Occupation Associate Market Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00	

Full Name (Last, First, Middle Initial) B. Jean Ann Bailey		Date of Receipt MM / DD / YYYY 04 / 27 / 2007
Mailing Address 516 Kings Ridge		Transaction ID: 70709.C495
City State Zip Code Liberty MO 64068		Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Hanger Orthopedic Group Inc.	Occupation Associate Market Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Jean Ann Bailey		Date of Receipt MM / DD / YYYY 05 / 11 / 2007
Mailing Address 516 Kings Ridge		Transaction ID: 70709.C496
City State Zip Code Liberty MO 64068		Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Hanger Orthopedic Group Inc.	Occupation Associate Market Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	150.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

Full Name (Last, First, Middle Initial) A. Jean Ann Bailey		Date of Receipt MM / DD / YYYY 05 / 25 / 2007
Mailing Address 516 Kings Ridge		Transaction ID: 70709.C615
City Liberty	State MO	Zip Code 64068
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Hanger Orthopedic Group Inc.	Occupation Associate Market Leader	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) B. Jean Ann Bailey		Date of Receipt MM / DD / YYYY 06 / 08 / 2007
Mailing Address 516 Kings Ridge		Transaction ID: 70709.C704
City Liberty	State MO	Zip Code 64068
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Hanger Orthopedic Group Inc.	Occupation Associate Market Leader	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) C. Jean Ann Bailey		Date of Receipt MM / DD / YYYY 06 / 22 / 2007
Mailing Address 516 Kings Ridge		Transaction ID: 70709.C794
City Liberty	State MO	Zip Code 64068
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer Hanger Orthopedic Group Inc.	Occupation Associate Market Leader	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	150.00
<b>TOTAL</b> This Period (last page this line number only) .....	



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

**A.** Full Name (Last, First, Middle Initial)  
Robert L Borengasser

Mailing Address 381 W. Laron Lane

City State Zip Code  
Tempe AZ 85284

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group Inc.

Occupation  
Director, Operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
100.00

Date of Receipt  
MM / DD / YYYY  
03 / 02 / 2007

Transaction ID: 70709.C134

Amount of Each Receipt this Period  
100.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Robert L Borengasser

Mailing Address 381 W. Laron Lane

City State Zip Code  
Tempe AZ 85284

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group Inc.

Occupation  
Director, Operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
200.00

Date of Receipt  
MM / DD / YYYY  
03 / 16 / 2007

Transaction ID: 70709.C217

Amount of Each Receipt this Period  
100.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Robert L Borengasser

Mailing Address 381 W. Laron Lane

City State Zip Code  
Tempe AZ 85284

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group Inc.

Occupation  
Director, Operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
03 / 30 / 2007

Transaction ID: 70709.C297

Amount of Each Receipt this Period  
100.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	300.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 102
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Robert L Borengasser		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 7	
Mailing Address 381 W. Laron Lane		Transaction ID: 70709.C377	
City State Zip Code Tempe AZ 85284	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Hanger Orthopedic Group Inc.	Occupation Director, Operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Robert L Borengasser		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 7	
Mailing Address 381 W. Laron Lane		Transaction ID: 70709.C541	
City State Zip Code Tempe AZ 85284	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Hanger Orthopedic Group Inc.	Occupation Director, Operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Robert L Borengasser		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 7	
Mailing Address 381 W. Laron Lane		Transaction ID: 70709.C542	
City State Zip Code Tempe AZ 85284	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Hanger Orthopedic Group Inc.	Occupation Director, Operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

**A.** Full Name (Last, First, Middle Initial)  
Robert L Borengasser

Mailing Address 381 W. Laron Lane

City State Zip Code  
Tempe AZ 85284

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group Inc.

Occupation  
Director, Operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
700.00

Date of Receipt  
MM / DD / YYYY  
05 / 25 / 2007

Transaction ID: 70709.C639

Amount of Each Receipt this Period  
100.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Robert L Borengasser

Mailing Address 381 W. Laron Lane

City State Zip Code  
Tempe AZ 85284

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group Inc.

Occupation  
Director, Operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
800.00

Date of Receipt  
MM / DD / YYYY  
06 / 08 / 2007

Transaction ID: 70709.C728

Amount of Each Receipt this Period  
100.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Robert L Borengasser

Mailing Address 381 W. Laron Lane

City State Zip Code  
Tempe AZ 85284

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group Inc.

Occupation  
Director, Operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
900.00

Date of Receipt  
MM / DD / YYYY  
06 / 22 / 2007

Transaction ID: 70709.C818

Amount of Each Receipt this Period  
100.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	300.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

**A.** Full Name (Last, First, Middle Initial)  
Frank Bostock

Mailing Address 2 W Kaler Drive

City State Zip Code  
Phoenix AZ 85021

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group Inc.

Occupation  
Market Leader

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
50.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 02 / 2007

Transaction ID: 70709.C114

Amount of Each Receipt this Period  
50.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Frank Bostock

Mailing Address 2 W Kaler Drive

City State Zip Code  
Phoenix AZ 85021

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group Inc.

Occupation  
Market Leader

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
100.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 16 / 2007

Transaction ID: 70709.C195

Amount of Each Receipt this Period  
50.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Frank Bostock

Mailing Address 2 W Kaler Drive

City State Zip Code  
Phoenix AZ 85021

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group Inc.

Occupation  
Market Leader

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
150.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 30 / 2007

Transaction ID: 70709.C275

Amount of Each Receipt this Period  
50.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	150.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 102
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Frank Bostock		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 7
Mailing Address 2 W Kaler Drive		Transaction ID: 70709.C355
City State Zip Code Phoenix AZ 85021	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Hanger Orthopedic Group Inc.	Occupation Market Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Frank Bostock		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 7
Mailing Address 2 W Kaler Drive		Transaction ID: 70709.C497
City State Zip Code Phoenix AZ 85021	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Hanger Orthopedic Group Inc.	Occupation Market Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Frank Bostock		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 7
Mailing Address 2 W Kaler Drive		Transaction ID: 70709.C498
City State Zip Code Phoenix AZ 85021	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Hanger Orthopedic Group Inc.	Occupation Market Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	150.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

**A.** Full Name (Last, First, Middle Initial)  
Frank Bostock

Mailing Address 2 W Kaler Drive

City State Zip Code  
Phoenix AZ 85021

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group Inc.

Occupation  
Market Leader

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
MM / DD / YYYY  
05 / 25 / 2007

Transaction ID: 70709.C616

Amount of Each Receipt this Period  
50.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Frank Bostock

Mailing Address 2 W Kaler Drive

City State Zip Code  
Phoenix AZ 85021

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group Inc.

Occupation  
Market Leader

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
MM / DD / YYYY  
06 / 08 / 2007

Transaction ID: 70709.C705

Amount of Each Receipt this Period  
50.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Frank Bostock

Mailing Address 2 W Kaler Drive

City State Zip Code  
Phoenix AZ 85021

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group Inc.

Occupation  
Market Leader

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  
MM / DD / YYYY  
06 / 22 / 2007

Transaction ID: 70709.C795

Amount of Each Receipt this Period  
50.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	150.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

**A.** Full Name (Last, First, Middle Initial)  
Kevin M Carroll

Mailing Address P.O. Box 1013

City State Zip Code  
Windermere FL 34786

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group Inc.

Occupation  
Vice President, Lower Ext.

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
40.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 02 / 2007

Transaction ID: 70709.C112

Amount of Each Receipt this Period  
40.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Kevin M Carroll

Mailing Address P.O. Box 1013

City State Zip Code  
Windermere FL 34786

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group Inc.

Occupation  
Vice President, Lower Ext.

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
80.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 16 / 2007

Transaction ID: 70709.C192

Amount of Each Receipt this Period  
40.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Kevin M Carroll

Mailing Address P.O. Box 1013

City State Zip Code  
Windermere FL 34786

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group Inc.

Occupation  
Vice President, Lower Ext.

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
120.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 30 / 2007

Transaction ID: 70709.C272

Amount of Each Receipt this Period  
40.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	120.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Kevin M Carroll Mailing Address P.O. Box 1013 City State Zip Code Windermere FL 34786 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 70709.C352 Amount of Each Receipt this Period <table border="1"> <tr> <td>40.00</td> </tr> </table> Receipt	M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	3		2	0	0	7	40.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	4		1	3		2	0	0	7														
40.00																							
Name of Employer: Hanger Orthopedic Group Inc. Occupation: Vice President, Lower Ext. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>160.00</td> </tr> </table>		160.00																					
160.00																							

<b>B.</b> Full Name (Last, First, Middle Initial) Kevin M Carroll Mailing Address P.O. Box 1013 City State Zip Code Windermere FL 34786 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 70709.C491 Amount of Each Receipt this Period <table border="1"> <tr> <td>40.00</td> </tr> </table> Receipt	M	M	/	D	D	/	Y	Y	Y	Y	0	4		2	7		2	0	0	7	40.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	4		2	7		2	0	0	7														
40.00																							
Name of Employer: Hanger Orthopedic Group Inc. Occupation: Vice President, Lower Ext. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>200.00</td> </tr> </table>		200.00																					
200.00																							

<b>C.</b> Full Name (Last, First, Middle Initial) Kevin M Carroll Mailing Address P.O. Box 1013 City State Zip Code Windermere FL 34786 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table> Transaction ID: 70709.C492 Amount of Each Receipt this Period <table border="1"> <tr> <td>40.00</td> </tr> </table> Receipt	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	1		2	0	0	7	40.00
M	M	/	D	D	/	Y	Y	Y	Y														
0	5		1	1		2	0	0	7														
40.00																							
Name of Employer: Hanger Orthopedic Group Inc. Occupation: Vice President, Lower Ext. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>240.00</td> </tr> </table>		240.00																					
240.00																							

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>120.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

**A.** Full Name (Last, First, Middle Initial)  
Kevin M Carroll

Mailing Address P.O. Box 1013

City State Zip Code  
Windermere FL 34786

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group Inc.

Occupation  
Vice President, Lower Ext.

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
280.00

Date of Receipt  
MM / DD / YYYY  
05 / 25 / 2007

Transaction ID: 70709.C612

Amount of Each Receipt this Period  
40.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Kevin M Carroll

Mailing Address P.O. Box 1013

City State Zip Code  
Windermere FL 34786

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group Inc.

Occupation  
Vice President, Lower Ext.

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
320.00

Date of Receipt  
MM / DD / YYYY  
06 / 08 / 2007

Transaction ID: 70709.C701

Amount of Each Receipt this Period  
40.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Kevin M Carroll

Mailing Address P.O. Box 1013

City State Zip Code  
Windermere FL 34786

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group Inc.

Occupation  
Vice President, Lower Ext.

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
360.00

Date of Receipt  
MM / DD / YYYY  
06 / 22 / 2007

Transaction ID: 70709.C791

Amount of Each Receipt this Period  
40.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	120.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

Full Name (Last, First, Middle Initial) <b>A. Edmond Charrette</b>		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 6 / 2 0 0 7	
Mailing Address 5 Clyde Pl		Transaction ID: 70709.C144	
City Lexington	State MA	Amount of Each Receipt this Period 1000.00	
Zip Code 02420		Receipt	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Ascedant Healthcare Intl.	Occupation AHI General Partner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) <b>B. Mark A Conry</b>		Date of Receipt M M / D D / Y Y Y Y 0 3 / 0 2 / 2 0 0 7	
Mailing Address 35 Linden Avenue, Apt 504		Transaction ID: 70709.C115	
City Long Beach	State CA	Amount of Each Receipt this Period 50.00	
Zip Code 90802		Receipt	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Hanger Orthopedic Group Inc.	Occupation Market Leader		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 50.00		

Full Name (Last, First, Middle Initial) <b>C. Mark A Conry</b>		Date of Receipt M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 7	
Mailing Address 35 Linden Avenue, Apt 504		Transaction ID: 70709.C196	
City Long Beach	State CA	Amount of Each Receipt this Period 50.00	
Zip Code 90802		Receipt	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Hanger Orthopedic Group Inc.	Occupation Market Leader		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 102
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Mark A Conry		Date of Receipt M M / D D / Y Y Y Y Y 03 / 30 / 2007
Mailing Address 35 Linden Avenue, Apt 504		Transaction ID: 70709.C276
City State Zip Code Long Beach CA 90802		Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Hanger Orthopedic Group Inc.	Occupation Market Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 150.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mark A Conry		Date of Receipt M M / D D / Y Y Y Y Y 04 / 13 / 2007
Mailing Address 35 Linden Avenue, Apt 504		Transaction ID: 70709.C356
City State Zip Code Long Beach CA 90802		Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Hanger Orthopedic Group Inc.	Occupation Market Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mark A Conry		Date of Receipt M M / D D / Y Y Y Y Y 04 / 27 / 2007
Mailing Address 35 Linden Avenue, Apt 504		Transaction ID: 70709.C499
City State Zip Code Long Beach CA 90802		Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Hanger Orthopedic Group Inc.	Occupation Market Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	150.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 20 / 102
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Mark A Conry Mailing Address 35 Linden Avenue, Apt 504 City State Zip Code Long Beach CA 90802 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 1 / 2 0 0 7 <b>Transaction ID:</b> 70709.C500 Amount of Each Receipt this Period 50.00 Receipt
Name of Employer Hanger Orthopedic Group Inc. Occupation Market Leader Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Mark A Conry Mailing Address 35 Linden Avenue, Apt 504 City State Zip Code Long Beach CA 90802 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7 <b>Transaction ID:</b> 70709.C617 Amount of Each Receipt this Period 50.00 Receipt
Name of Employer Hanger Orthopedic Group Inc. Occupation Market Leader Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Mark A Conry Mailing Address 35 Linden Avenue, Apt 504 City State Zip Code Long Beach CA 90802 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 8 / 2 0 0 7 <b>Transaction ID:</b> 70709.C706 Amount of Each Receipt this Period 50.00 Receipt
Name of Employer Hanger Orthopedic Group Inc. Occupation Market Leader Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	150.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 102		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Mark A Conry		Date of Receipt M M / D D / Y Y Y Y 06 / 22 / 2007
Mailing Address 35 Linden Avenue, Apt 504		Transaction ID: 70709.C796
City State Zip Code Long Beach CA 90802	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Hanger Orthopedic Group Inc.	Occupation Market Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Thomas Cooper		Date of Receipt M M / D D / Y Y Y Y 03 / 13 / 2007
Mailing Address 4715 Viewridge Ave Ste 230		Transaction ID: 70709.C222
City State Zip Code San Diego CA 92123	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer VeriCare Management Inc.	Occupation CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Thomas DeMello		Date of Receipt M M / D D / Y Y Y Y 04 / 06 / 2007
Mailing Address 17 Winthrop Rd		Transaction ID: 70709.C381
City State Zip Code Wayland MA 01778	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Mellon Bank	Occupation VP Talent Acquisition	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1550.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

**A.** Full Name (Last, First, Middle Initial)  
Bradford C Deudne

Mailing Address 33 Meriwether Trail

City State Zip Code  
Congers NY 10920

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group Inc.

Occupation  
Market Leader

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
50.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 02 / 2007

Transaction ID: 70709.C116

Amount of Each Receipt this Period  
50.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Bradford C Deudne

Mailing Address 33 Meriwether Trail

City State Zip Code  
Congers NY 10920

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group Inc.

Occupation  
Market Leader

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
100.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 16 / 2007

Transaction ID: 70709.C197

Amount of Each Receipt this Period  
50.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Bradford C Deudne

Mailing Address 33 Meriwether Trail

City State Zip Code  
Congers NY 10920

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group Inc.

Occupation  
Market Leader

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
150.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 30 / 2007

Transaction ID: 70709.C277

Amount of Each Receipt this Period  
50.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	150.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Bradford C Deudne		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 3 / 2 0 0 7
Mailing Address 33 Meriwether Trail		Transaction ID: 70709.C357
City State Zip Code Congers NY 10920	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Hanger Orthopedic Group Inc.	Occupation Market Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Bradford C Deudne		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 7 / 2 0 0 7
Mailing Address 33 Meriwether Trail		Transaction ID: 70709.C501
City State Zip Code Congers NY 10920	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Hanger Orthopedic Group Inc.	Occupation Market Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Bradford C Deudne		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 1 / 2 0 0 7
Mailing Address 33 Meriwether Trail		Transaction ID: 70709.C502
City State Zip Code Congers NY 10920	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Hanger Orthopedic Group Inc.	Occupation Market Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	150.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 102
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Bradford C Deudne		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 7
Mailing Address 33 Meriwether Trail		Transaction ID: 70709.C618
City State Zip Code Congers NY 10920	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Hanger Orthopedic Group Inc.	Occupation Market Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Bradford C Deudne		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 8 / 2 0 0 7
Mailing Address 33 Meriwether Trail		Transaction ID: 70709.C707
City State Zip Code Congers NY 10920	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Hanger Orthopedic Group Inc.	Occupation Market Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Bradford C Deudne		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 2 / 2 0 0 7
Mailing Address 33 Meriwether Trail		Transaction ID: 70709.C797
City State Zip Code Congers NY 10920	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Hanger Orthopedic Group Inc.	Occupation Market Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	150.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Frank Erdeljac		Date of Receipt M M / D D / Y Y Y Y 03 / 16 / 2007
Mailing Address 137 Martin Road		Transaction ID: 70709.C198
City State Zip Code Pittsburgh PA 15237		Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Hanger Orthopedic Group Inc.	Occupation Associate Market Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 50.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Frank Erdeljac		Date of Receipt M M / D D / Y Y Y Y 03 / 30 / 2007
Mailing Address 137 Martin Road		Transaction ID: 70709.C278
City State Zip Code Pittsburgh PA 15237		Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Hanger Orthopedic Group Inc.	Occupation Associate Market Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Frank Erdeljac		Date of Receipt M M / D D / Y Y Y Y 04 / 13 / 2007
Mailing Address 137 Martin Road		Transaction ID: 70709.C358
City State Zip Code Pittsburgh PA 15237		Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Hanger Orthopedic Group Inc.	Occupation Associate Market Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 150.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	150.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Frank Erdeljac		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 7 / 2 0 0 7	
Mailing Address 137 Martin Road		Transaction ID: 70709.C503	
City State Zip Code Pittsburgh PA 15237		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Hanger Orthopedic Group Inc.		Occupation Associate Market Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 200.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Frank Erdeljac		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 1 / 2 0 0 7	
Mailing Address 137 Martin Road		Transaction ID: 70709.C504	
City State Zip Code Pittsburgh PA 15237		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Hanger Orthopedic Group Inc.		Occupation Associate Market Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Frank Erdeljac		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7	
Mailing Address 137 Martin Road		Transaction ID: 70709.C619	
City State Zip Code Pittsburgh PA 15237		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Hanger Orthopedic Group Inc.		Occupation Associate Market Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	150.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 102
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Frank Erdeljac		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 8 / 2 0 0 7	
Mailing Address 137 Martin Road		<b>Transaction ID:</b> 70709.C708	
City State Zip Code Pittsburgh PA 15237		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Hanger Orthopedic Group Inc.		Occupation Associate Market Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Frank Erdeljac		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 2 / 2 0 0 7	
Mailing Address 137 Martin Road		<b>Transaction ID:</b> 70709.C798	
City State Zip Code Pittsburgh PA 15237		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Hanger Orthopedic Group Inc.		Occupation Associate Market Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Wallis Farraday		Date of Receipt M M / D D / Y Y Y Y 0 3 / 0 2 / 2 0 0 7	
Mailing Address 4997 Keeneland Cr		<b>Transaction ID:</b> 70709.C117	
City State Zip Code Orlando FL 32819		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Hanger Orthopedic Group Inc.		Occupation Market Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 50.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	150.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	50.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 / 102
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Wallis Farraday		Date of Receipt M M / D D / Y Y Y Y 03 / 16 / 2007	
Mailing Address 4997 Keeneland Cr		<b>Transaction ID:</b> 70709.C199	
City State Zip Code Orlando FL 32819	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer Hanger Orthopedic Group Inc.	Occupation Market Leader		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Wallis Farraday		Date of Receipt M M / D D / Y Y Y Y 03 / 30 / 2007	
Mailing Address 4997 Keeneland Cr		<b>Transaction ID:</b> 70709.C279	
City State Zip Code Orlando FL 32819	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer Hanger Orthopedic Group Inc.	Occupation Market Leader		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 150.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Wallis Farraday		Date of Receipt M M / D D / Y Y Y Y 04 / 13 / 2007	
Mailing Address 4997 Keeneland Cr		<b>Transaction ID:</b> 70709.C359	
City State Zip Code Orlando FL 32819	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer Hanger Orthopedic Group Inc.	Occupation Market Leader		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	150.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 102
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

Full Name (Last, First, Middle Initial) <b>A. Wallis Farraday</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 27 / 2007	
Mailing Address 4997 Keeneland Cr		<b>Transaction ID: 70709.C505</b>	
City State Zip Code Orlando FL 32819		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Hanger Orthopedic Group Inc.		Occupation Market Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B. Wallis Farraday</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2007	
Mailing Address 4997 Keeneland Cr		<b>Transaction ID: 70709.C506</b>	
City State Zip Code Orlando FL 32819		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Hanger Orthopedic Group Inc.		Occupation Market Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>C. Wallis Farraday</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 25 / 2007	
Mailing Address 4997 Keeneland Cr		<b>Transaction ID: 70709.C620</b>	
City State Zip Code Orlando FL 32819		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Hanger Orthopedic Group Inc.		Occupation Market Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	150.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 102
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

Full Name (Last, First, Middle Initial) <b>A. Wallis Farraday</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 8 / 2 0 0 7	
Mailing Address 4997 Keeneland Cr		<b>Transaction ID: 70709.C709</b>	
City State Zip Code Orlando FL 32819		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Hanger Orthopedic Group Inc.	Occupation Market Leader		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) <b>B. Wallis Farraday</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 2 / 2 0 0 7	
Mailing Address 4997 Keeneland Cr		<b>Transaction ID: 70709.C799</b>	
City State Zip Code Orlando FL 32819		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Hanger Orthopedic Group Inc.	Occupation Market Leader		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00		

Full Name (Last, First, Middle Initial) <b>C. Michael R George</b>		Date of Receipt M M / D D / Y Y Y Y 0 3 / 0 2 / 2 0 0 7	
Mailing Address 28 San Tomas		<b>Transaction ID: 70709.C118</b>	
City State Zip Code Rancho Santa Marga CA 92688		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Hanger Orthopedic Group Inc.	Occupation Vice President, Operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 50.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	150.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 / 102
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

Full Name (Last, First, Middle Initial) <b>A. Michael R George</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 16 / 2007	
Mailing Address 28 San Tomas		Transaction ID: 70709.C200	
City State Zip Code Rancho Santa Marga CA 92688		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Hanger Orthopedic Group Inc.		Occupation Vice President, Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 100.00	

Full Name (Last, First, Middle Initial) <b>B. Michael R George</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 30 / 2007	
Mailing Address 28 San Tomas		Transaction ID: 70709.C280	
City State Zip Code Rancho Santa Marga CA 92688		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Hanger Orthopedic Group Inc.		Occupation Vice President, Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 150.00	

Full Name (Last, First, Middle Initial) <b>C. Michael R George</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 13 / 2007	
Mailing Address 28 San Tomas		Transaction ID: 70709.C360	
City State Zip Code Rancho Santa Marga CA 92688		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Hanger Orthopedic Group Inc.		Occupation Vice President, Operations	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 200.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	150.00
<b>TOTAL</b> This Period (last page this line number only) .....	150.00

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 / 102
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

Full Name (Last, First, Middle Initial) <b>A. Michael R George</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 27 / 2007	
Mailing Address 28 San Tomas		Transaction ID: 70709.C507	
City State Zip Code Rancho Santa Marga CA 92688		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Hanger Orthopedic Group Inc.	Occupation Vice President, Operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B. Michael R George</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2007	
Mailing Address 28 San Tomas		Transaction ID: 70709.C508	
City State Zip Code Rancho Santa Marga CA 92688		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Hanger Orthopedic Group Inc.	Occupation Vice President, Operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C. Michael R George</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 25 / 2007	
Mailing Address 28 San Tomas		Transaction ID: 70709.C621	
City State Zip Code Rancho Santa Marga CA 92688		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Hanger Orthopedic Group Inc.	Occupation Vice President, Operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	150.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 / 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

Full Name (Last, First, Middle Initial) <b>A. Michael R George</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 08 / 2007	
Mailing Address 28 San Tomas		<b>Transaction ID: 70709.C710</b>	
City State Zip Code Rancho Santa Marga CA 92688		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Hanger Orthopedic Group Inc.	Occupation Vice President, Operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) <b>B. Michael R George</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 22 / 2007	
Mailing Address 28 San Tomas		<b>Transaction ID: 70709.C800</b>	
City State Zip Code Rancho Santa Marga CA 92688		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Hanger Orthopedic Group Inc.	Occupation Vice President, Operations		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00		

Full Name (Last, First, Middle Initial) <b>C. Mark S Helle</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 02 / 2007	
Mailing Address 2 South 541 Arboretum Rd.		<b>Transaction ID: 70709.C119</b>	
City State Zip Code Glen Ellyn IL 60137		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Hanger Orthopedic Group Inc.	Occupation Vice President, Sales		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 50.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	150.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 102
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Mark S Helle		Date of Receipt M M / D D / Y Y Y Y 03 / 16 / 2007
Mailing Address 2 South 541 Arboretum Rd.		Transaction ID: 70709.C201
City State Zip Code Glen Ellyn IL 60137	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Hanger Orthopedic Group Inc.	Occupation Vice President, Sales	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mark S Helle		Date of Receipt M M / D D / Y Y Y Y 03 / 30 / 2007
Mailing Address 2 South 541 Arboretum Rd.		Transaction ID: 70709.C281
City State Zip Code Glen Ellyn IL 60137	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Hanger Orthopedic Group Inc.	Occupation Vice President, Sales	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 150.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mark S Helle		Date of Receipt M M / D D / Y Y Y Y 04 / 13 / 2007
Mailing Address 2 South 541 Arboretum Rd.		Transaction ID: 70709.C361
City State Zip Code Glen Ellyn IL 60137	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Hanger Orthopedic Group Inc.	Occupation Vice President, Sales	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	150.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 / 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Mark S Helle		Date of Receipt M M / D D / Y Y Y Y 04 / 27 / 2007
Mailing Address 2 South 541 Arboretum Rd.		Transaction ID: 70709.C509
City State Zip Code Glen Ellyn IL 60137	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Hanger Orthopedic Group Inc.	Occupation Vice President, Sales	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mark S Helle		Date of Receipt M M / D D / Y Y Y Y 05 / 11 / 2007
Mailing Address 2 South 541 Arboretum Rd.		Transaction ID: 70709.C510
City State Zip Code Glen Ellyn IL 60137	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Hanger Orthopedic Group Inc.	Occupation Vice President, Sales	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mark S Helle		Date of Receipt M M / D D / Y Y Y Y 05 / 25 / 2007
Mailing Address 2 South 541 Arboretum Rd.		Transaction ID: 70709.C622
City State Zip Code Glen Ellyn IL 60137	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Hanger Orthopedic Group Inc.	Occupation Vice President, Sales	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	150.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 / 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

**A.** Full Name (Last, First, Middle Initial)  
Mark S Helle

Mailing Address 2 South 541 Arboretum Rd.

City State Zip Code  
Glen Ellyn IL 60137

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group Inc.

Occupation  
Vice President, Sales

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 08 / 2007

Transaction ID: 70709.C711

Amount of Each Receipt this Period  
50.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Mark S Helle

Mailing Address 2 South 541 Arboretum Rd.

City State Zip Code  
Glen Ellyn IL 60137

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group Inc.

Occupation  
Vice President, Sales

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 22 / 2007

Transaction ID: 70709.C801

Amount of Each Receipt this Period  
50.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
John S Hildebrand

Mailing Address 5622 Billy Casper Drive

City State Zip Code  
Billings MT 59106

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group Inc.

Occupation  
Associate Market Leader

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
40.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 16 / 2007

Transaction ID: 70709.C193

Amount of Each Receipt this Period  
40.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	140.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 / 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

Full Name (Last, First, Middle Initial) <b>A.</b> John S Hildebrand		Date of Receipt M M / D D / Y Y Y Y 0 3 / 3 0 / 2 0 0 7
Mailing Address 5622 Billy Casper Drive		Transaction ID: 70709.C273
City Billings State MT Zip Code 59106	Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Hanger Orthopedic Group Inc. Occupation Associate Market Leader	Aggregate Year-to-Date ▼ 80.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B.</b> John S Hildebrand		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 7
Mailing Address 5622 Billy Casper Drive		Transaction ID: 70709.C353
City Billings State MT Zip Code 59106	Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Hanger Orthopedic Group Inc. Occupation Associate Market Leader	Aggregate Year-to-Date ▼ 120.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C.</b> John S Hildebrand		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 7
Mailing Address 5622 Billy Casper Drive		Transaction ID: 70709.C493
City Billings State MT Zip Code 59106	Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Hanger Orthopedic Group Inc. Occupation Associate Market Leader	Aggregate Year-to-Date ▼ 160.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	120.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 / 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

**A.** Full Name (Last, First, Middle Initial)  
John S Hildebrand

Mailing Address 5622 Billy Casper Drive

City Billings State MT Zip Code 59106

FEC ID number of contributing federal political committee. **C**

Name of Employer Hanger Orthopedic Group Inc. Occupation Associate Market Leader

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
05 / 11 / 2007

Transaction ID: 70709.C494

Amount of Each Receipt this Period  
40.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
John S Hildebrand

Mailing Address 5622 Billy Casper Drive

City Billings State MT Zip Code 59106

FEC ID number of contributing federal political committee. **C**

Name of Employer Hanger Orthopedic Group Inc. Occupation Associate Market Leader

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
05 / 25 / 2007

Transaction ID: 70709.C613

Amount of Each Receipt this Period  
40.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
John S Hildebrand

Mailing Address 5622 Billy Casper Drive

City Billings State MT Zip Code 59106

FEC ID number of contributing federal political committee. **C**

Name of Employer Hanger Orthopedic Group Inc. Occupation Associate Market Leader

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt  
06 / 08 / 2007

Transaction ID: 70709.C702

Amount of Each Receipt this Period  
40.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	120.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 / 102
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

Full Name (Last, First, Middle Initial) <b>A. John S Hildebrand</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 22 / 2007	
Mailing Address 5622 Billy Casper Drive		<b>Transaction ID: 70709.C792</b>	
City State Zip Code Billings MT 59106	Amount of Each Receipt this Period 40.00		
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Hanger Orthopedic Group Inc.	Occupation Associate Market Leader		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00		

Full Name (Last, First, Middle Initial) <b>B. William Hineman</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 02 / 2007	
Mailing Address 3121 Morgan Circle		<b>Transaction ID: 70709.C120</b>	
City State Zip Code Bismarck ND 58503	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Hanger Orthopedic Group Inc.	Occupation Associate Market Leader		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 50.00		

Full Name (Last, First, Middle Initial) <b>C. William Hineman</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 16 / 2007	
Mailing Address 3121 Morgan Circle		<b>Transaction ID: 70709.C202</b>	
City State Zip Code Bismarck ND 58503	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Hanger Orthopedic Group Inc.	Occupation Associate Market Leader		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	140.00
<b>TOTAL</b> This Period (last page this line number only) .....	(Empty box)

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 / 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

Full Name (Last, First, Middle Initial) <b>A.</b> William Hineman		Date of Receipt M M / D D / Y Y Y Y 03 / 30 / 2007	
Mailing Address 3121 Morgan Circle		<b>Transaction ID:</b> 70709.C282	
City State Zip Code Bismarck ND 58503		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Hanger Orthopedic Group Inc.		Occupation Associate Market Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 150.00	

Full Name (Last, First, Middle Initial) <b>B.</b> William Hineman		Date of Receipt M M / D D / Y Y Y Y 04 / 13 / 2007	
Mailing Address 3121 Morgan Circle		<b>Transaction ID:</b> 70709.C362	
City State Zip Code Bismarck ND 58503		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Hanger Orthopedic Group Inc.		Occupation Associate Market Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 200.00	

Full Name (Last, First, Middle Initial) <b>C.</b> William Hineman		Date of Receipt M M / D D / Y Y Y Y 04 / 27 / 2007	
Mailing Address 3121 Morgan Circle		<b>Transaction ID:</b> 70709.C511	
City State Zip Code Bismarck ND 58503		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Hanger Orthopedic Group Inc.		Occupation Associate Market Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	150.00
<b>TOTAL</b> This Period (last page this line number only) .....	150.00



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 / 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

Full Name (Last, First, Middle Initial) <b>A. William Hineman</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 7	
Mailing Address 3121 Morgan Circle		<b>Transaction ID: 70709.C512</b>	
City State Zip Code Bismarck ND 58503		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Hanger Orthopedic Group Inc.		Occupation Associate Market Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B. William Hineman</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 7	
Mailing Address 3121 Morgan Circle		<b>Transaction ID: 70709.C623</b>	
City State Zip Code Bismarck ND 58503		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Hanger Orthopedic Group Inc.		Occupation Associate Market Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) <b>C. William Hineman</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 8 / 2 0 0 7	
Mailing Address 3121 Morgan Circle		<b>Transaction ID: 70709.C712</b>	
City State Zip Code Bismarck ND 58503		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Hanger Orthopedic Group Inc.		Occupation Associate Market Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	150.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 / 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

**A.** Full Name (Last, First, Middle Initial)  
William Hineman

Mailing Address 3121 Morgan Circle

City State Zip Code  
Bismarck ND 58503

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group Inc.

Occupation  
Associate Market Leader

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 22 / 2007

Transaction ID: 70709.C802

Amount of Each Receipt this Period  
50.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Dennis J Huysman

Mailing Address 3 Pickwick Lane

City State Zip Code  
Old Saybrook CT 06475

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group Inc.

Occupation  
Market Leader

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
50.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 02 / 2007

Transaction ID: 70709.C121

Amount of Each Receipt this Period  
50.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Dennis J Huysman

Mailing Address 3 Pickwick Lane

City State Zip Code  
Old Saybrook CT 06475

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group Inc.

Occupation  
Market Leader

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
100.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 16 / 2007

Transaction ID: 70709.C203

Amount of Each Receipt this Period  
50.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	150.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 / 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Dennis J Huysman		Date of Receipt M M / D D / Y Y Y Y Y 03 / 30 / 2007
Mailing Address 3 Pickwick Lane		Transaction ID: 70709.C283
City State Zip Code Old Saybrook CT 06475		Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Hanger Orthopedic Group Inc.	Occupation Market Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 150.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Dennis J Huysman		Date of Receipt M M / D D / Y Y Y Y Y 04 / 13 / 2007
Mailing Address 3 Pickwick Lane		Transaction ID: 70709.C363
City State Zip Code Old Saybrook CT 06475		Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Hanger Orthopedic Group Inc.	Occupation Market Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Dennis J Huysman		Date of Receipt M M / D D / Y Y Y Y Y 04 / 27 / 2007
Mailing Address 3 Pickwick Lane		Transaction ID: 70709.C513
City State Zip Code Old Saybrook CT 06475		Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Hanger Orthopedic Group Inc.	Occupation Market Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	150.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 / 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Dennis J Huysman		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 7
Mailing Address 3 Pickwick Lane		Transaction ID: 70709.C514
City State Zip Code Old Saybrook CT 06475		Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Hanger Orthopedic Group Inc.	Occupation Market Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Dennis J Huysman		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 7
Mailing Address 3 Pickwick Lane		Transaction ID: 70709.C624
City State Zip Code Old Saybrook CT 06475		Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Hanger Orthopedic Group Inc.	Occupation Market Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Dennis J Huysman		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 8 / 2 0 0 7
Mailing Address 3 Pickwick Lane		Transaction ID: 70709.C713
City State Zip Code Old Saybrook CT 06475		Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Hanger Orthopedic Group Inc.	Occupation Market Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	150.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 / 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

**A.** Full Name (Last, First, Middle Initial)  
Dennis J Huysman

Mailing Address 3 Pickwick Lane

City State Zip Code  
Old Saybrook CT 06475

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group Inc.

Occupation  
Market Leader

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 22 / 2007

Transaction ID: 70709.C803

Amount of Each Receipt this Period  
50.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Charles E Jordan

Mailing Address 207 Vixen View

City State Zip Code  
Phoenixville PA 19460

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group Inc.

Occupation  
Director of Operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
25.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 02 / 2007

Transaction ID: 70709.C110

Amount of Each Receipt this Period  
25.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Charles E Jordan

Mailing Address 207 Vixen View

City State Zip Code  
Phoenixville PA 19460

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group Inc.

Occupation  
Director of Operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
50.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 16 / 2007

Transaction ID: 70709.C189

Amount of Each Receipt this Period  
25.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	100.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 / 102
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Charles E Jordan		Date of Receipt M M / D D / Y Y Y Y 03 / 30 / 2007	
Mailing Address 207 Vixen View		<b>Transaction ID:</b> 70709.C269	
City Phoenixville	State PA	Zip Code 19460	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Hanger Orthopedic Group Inc.	Occupation Director of Operations	Aggregate Year-to-Date ▼ 75.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B.</b> Charles E Jordan		Date of Receipt M M / D D / Y Y Y Y 04 / 13 / 2007	
Mailing Address 207 Vixen View		<b>Transaction ID:</b> 70709.C348	
City Phoenixville	State PA	Zip Code 19460	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Hanger Orthopedic Group Inc.	Occupation Director of Operations	Aggregate Year-to-Date ▼ 100.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C.</b> Charles E Jordan		Date of Receipt M M / D D / Y Y Y Y 04 / 27 / 2007	
Mailing Address 207 Vixen View		<b>Transaction ID:</b> 70709.C481	
City Phoenixville	State PA	Zip Code 19460	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Hanger Orthopedic Group Inc.	Occupation Director of Operations	Aggregate Year-to-Date ▼ 125.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	75.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 / 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

**A.** Full Name (Last, First, Middle Initial)  
Charles E Jordan

Mailing Address 207 Vixen View

City State Zip Code  
Phoenixville PA 19460

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group Inc.

Occupation  
Director of Operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
150.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 11 / 2007

Transaction ID: 70709.C482

Amount of Each Receipt this Period  
25.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Charles E Jordan

Mailing Address 207 Vixen View

City State Zip Code  
Phoenixville PA 19460

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group Inc.

Occupation  
Director of Operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
175.00

Date of Receipt  
M M / D D / Y Y Y Y  
05 / 25 / 2007

Transaction ID: 70709.C606

Amount of Each Receipt this Period  
25.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Charles E Jordan

Mailing Address 207 Vixen View

City State Zip Code  
Phoenixville PA 19460

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group Inc.

Occupation  
Director of Operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
200.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 08 / 2007

Transaction ID: 70709.C695

Amount of Each Receipt this Period  
25.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	75.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 / 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

**A.** Full Name (Last, First, Middle Initial)  
Charles E Jordan

Mailing Address 207 Vixen View

City State Zip Code  
Phoenixville PA 19460

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group Inc.

Occupation  
Director of Operations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
MM / DD / YYYY  
06 / 22 / 2007

Transaction ID: 70709.C785

Amount of Each Receipt this Period  
25.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Isaac Kaufman

Mailing Address 8204 Township Dr

City State Zip Code  
Owings Mills MD 21117

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Advanced Medical Management

Occupation  
Sr VP/CFO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
05 / 10 / 2007

Transaction ID: 70709.C554

Amount of Each Receipt this Period  
1000.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Thomas F Kirk

Mailing Address 2616 Lighthouse Bend Drive

City State Zip Code  
Ponte Vedra Beach FL 32082

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group Inc.

Occupation  
President & COO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
50.00

Date of Receipt  
MM / DD / YYYY  
03 / 02 / 2007

Transaction ID: 70709.C122

Amount of Each Receipt this Period  
50.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1075.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 / 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

**A.** Full Name (Last, First, Middle Initial)  
Thomas F Kirk

Mailing Address 2616 Lighthouse Bend Drive

City State Zip Code  
Ponte Vedra Beach FL 32082

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group Inc.

Occupation  
President & COO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
100.00

Date of Receipt  
MM / DD / YYYY  
03 / 16 / 2007

Transaction ID: 70709.C204

Amount of Each Receipt this Period  
50.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Thomas F Kirk

Mailing Address 2616 Lighthouse Bend Drive

City State Zip Code  
Ponte Vedra Beach FL 32082

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group Inc.

Occupation  
President & COO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
150.00

Date of Receipt  
MM / DD / YYYY  
03 / 30 / 2007

Transaction ID: 70709.C284

Amount of Each Receipt this Period  
50.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Thomas F Kirk

Mailing Address 2616 Lighthouse Bend Drive

City State Zip Code  
Ponte Vedra Beach FL 32082

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group Inc.

Occupation  
President & COO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
200.00

Date of Receipt  
MM / DD / YYYY  
04 / 13 / 2007

Transaction ID: 70709.C364

Amount of Each Receipt this Period  
50.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	150.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 / 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Thomas F Kirk		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 7
Mailing Address 2616 Lighthouse Bend Drive		Transaction ID: 70709.C515
City State Zip Code Ponte Vedra Beach FL 32082		Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Hanger Orthopedic Group Inc.	Occupation President & COO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Thomas F Kirk		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 7
Mailing Address 2616 Lighthouse Bend Drive		Transaction ID: 70709.C516
City State Zip Code Ponte Vedra Beach FL 32082		Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Hanger Orthopedic Group Inc.	Occupation President & COO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Thomas F Kirk		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 7
Mailing Address 2616 Lighthouse Bend Drive		Transaction ID: 70709.C625
City State Zip Code Ponte Vedra Beach FL 32082		Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Hanger Orthopedic Group Inc.	Occupation President & COO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	150.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 / 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

**A.** Full Name (Last, First, Middle Initial)  
Thomas F Kirk

Mailing Address 2616 Lighthouse Bend Drive

City State Zip Code  
Ponte Vedra Beach FL 32082

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group Inc.

Occupation  
President & COO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
MM / DD / YYYY  
06 / 08 / 2007

Transaction ID: 70709.C714

Amount of Each Receipt this Period  
50.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Thomas F Kirk

Mailing Address 2616 Lighthouse Bend Drive

City State Zip Code  
Ponte Vedra Beach FL 32082

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group Inc.

Occupation  
President & COO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  
MM / DD / YYYY  
06 / 22 / 2007

Transaction ID: 70709.C804

Amount of Each Receipt this Period  
50.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Marc Kowatic

Mailing Address 117 Fox Path

City State Zip Code  
Coraopolis PA 15108

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group, Inc.

Occupation  
Market Leaders - MI-OH-PA

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
MM / DD / YYYY  
03 / 07 / 2007

Transaction ID: 70709.C221

Amount of Each Receipt this Period  
2500.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2600.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 52 / 102						
	(check only one)							
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Kent D Lane		Date of Receipt M M / D D / Y Y Y Y 03 / 02 / 2007	
Mailing Address 178 Hunters Ridge Drive		<b>Transaction ID:</b> 70709.C123	
City State Zip Code Lexington SC 29072	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Hanger Orthopedic Group Inc.	Occupation Market Leader		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 50.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Kent D Lane		Date of Receipt M M / D D / Y Y Y Y 03 / 16 / 2007	
Mailing Address 178 Hunters Ridge Drive		<b>Transaction ID:</b> 70709.C205	
City State Zip Code Lexington SC 29072	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Hanger Orthopedic Group Inc.	Occupation Market Leader		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Kent D Lane		Date of Receipt M M / D D / Y Y Y Y 03 / 30 / 2007	
Mailing Address 178 Hunters Ridge Drive		<b>Transaction ID:</b> 70709.C285	
City State Zip Code Lexington SC 29072	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Hanger Orthopedic Group Inc.	Occupation Market Leader		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 150.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	150.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	150.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 53 / 102
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Kent D Lane		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 3 / 2 0 0 7
Mailing Address 178 Hunters Ridge Drive		<b>Transaction ID:</b> 70709.C365
City State Zip Code Lexington SC 29072		Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Hanger Orthopedic Group Inc.	Occupation Market Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Kent D Lane		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 7 / 2 0 0 7
Mailing Address 178 Hunters Ridge Drive		<b>Transaction ID:</b> 70709.C517
City State Zip Code Lexington SC 29072		Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Hanger Orthopedic Group Inc.	Occupation Market Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Kent D Lane		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 1 / 2 0 0 7
Mailing Address 178 Hunters Ridge Drive		<b>Transaction ID:</b> 70709.C518
City State Zip Code Lexington SC 29072		Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Hanger Orthopedic Group Inc.	Occupation Market Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	150.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 / 102
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

A. Full Name (Last, First, Middle Initial) Kent D Lane Mailing Address 178 Hunters Ridge Drive City Lexington State SC Zip Code 29072 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 7 Transaction ID: 70709.C626 Amount of Each Receipt this Period 50.00 Receipt
Name of Employer Hanger Orthopedic Group Inc. Occupation Market Leader Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 350.00		

B. Full Name (Last, First, Middle Initial) Kent D Lane Mailing Address 178 Hunters Ridge Drive City Lexington State SC Zip Code 29072 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 8 / 2 0 0 7 Transaction ID: 70709.C715 Amount of Each Receipt this Period 50.00 Receipt
Name of Employer Hanger Orthopedic Group Inc. Occupation Market Leader Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00		

C. Full Name (Last, First, Middle Initial) Kent D Lane Mailing Address 178 Hunters Ridge Drive City Lexington State SC Zip Code 29072 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 2 / 2 0 0 7 Transaction ID: 70709.C805 Amount of Each Receipt this Period 50.00 Receipt
Name of Employer Hanger Orthopedic Group Inc. Occupation Market Leader Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	150.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 / 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Terry D Loveless		Date of Receipt M M / D D / Y Y Y Y Y 03 / 02 / 2007	
Mailing Address 104 Whitley Way		<b>Transaction ID:</b> 70709.C124	
City State Zip Code Lynchburg VA 24503		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Hanger Orthopedic Group Inc.	Occupation Associate Market Leader		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 50.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Terry D Loveless		Date of Receipt M M / D D / Y Y Y Y Y 03 / 16 / 2007	
Mailing Address 104 Whitley Way		<b>Transaction ID:</b> 70709.C206	
City State Zip Code Lynchburg VA 24503		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Hanger Orthopedic Group Inc.	Occupation Associate Market Leader		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Terry D Loveless		Date of Receipt M M / D D / Y Y Y Y Y 03 / 30 / 2007	
Mailing Address 104 Whitley Way		<b>Transaction ID:</b> 70709.C286	
City State Zip Code Lynchburg VA 24503		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Hanger Orthopedic Group Inc.	Occupation Associate Market Leader		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 150.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	150.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 / 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Terry D Loveless		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 7
Mailing Address 104 Whitley Way		<b>Transaction ID:</b> 70709.C366
City State Zip Code Lynchburg VA 24503	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer Hanger Orthopedic Group Inc.	Occupation Associate Market Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Terry D Loveless		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 7
Mailing Address 104 Whitley Way		<b>Transaction ID:</b> 70709.C519
City State Zip Code Lynchburg VA 24503	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer Hanger Orthopedic Group Inc.	Occupation Associate Market Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Terry D Loveless		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 7
Mailing Address 104 Whitley Way		<b>Transaction ID:</b> 70709.C520
City State Zip Code Lynchburg VA 24503	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer Hanger Orthopedic Group Inc.	Occupation Associate Market Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	150.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 / 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Terry D Loveless		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7	
Mailing Address 104 Whitley Way		<b>Transaction ID:</b> 70709.C627	
City State Zip Code Lynchburg VA 24503		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Hanger Orthopedic Group Inc.		Occupation Associate Market Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Terry D Loveless		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 8 / 2 0 0 7	
Mailing Address 104 Whitley Way		<b>Transaction ID:</b> 70709.C716	
City State Zip Code Lynchburg VA 24503		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Hanger Orthopedic Group Inc.		Occupation Associate Market Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Terry D Loveless		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 2 / 2 0 0 7	
Mailing Address 104 Whitley Way		<b>Transaction ID:</b> 70709.C806	
City State Zip Code Lynchburg VA 24503		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Hanger Orthopedic Group Inc.		Occupation Associate Market Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 450.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	150.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 / 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/>	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Jeffery S Lutz		Date of Receipt M M / D D / Y Y Y Y 03 / 02 / 2007
Mailing Address 100 Shannon Road		Transaction ID: 70709.C133
City State Zip Code Lafayette LA 70503	Amount of Each Receipt this Period 65.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Hanger Orthopedic Group Inc.	Occupation Market Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 65.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Jeffery S Lutz		Date of Receipt M M / D D / Y Y Y Y 03 / 16 / 2007
Mailing Address 100 Shannon Road		Transaction ID: 70709.C216
City State Zip Code Lafayette LA 70503	Amount of Each Receipt this Period 65.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Hanger Orthopedic Group Inc.	Occupation Market Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 130.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Jeffery S Lutz		Date of Receipt M M / D D / Y Y Y Y 03 / 30 / 2007
Mailing Address 100 Shannon Road		Transaction ID: 70709.C296
City State Zip Code Lafayette LA 70503	Amount of Each Receipt this Period 65.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Hanger Orthopedic Group Inc.	Occupation Market Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 195.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	195.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 59 / 102
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Jeffery S Lutz		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 7
Mailing Address 100 Shannon Road		Transaction ID: 70709.C376
City State Zip Code Lafayette LA 70503	Amount of Each Receipt this Period 65.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Hanger Orthopedic Group Inc.	Occupation Market Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Jeffery S Lutz		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 7
Mailing Address 100 Shannon Road		Transaction ID: 70709.C539
City State Zip Code Lafayette LA 70503	Amount of Each Receipt this Period 65.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Hanger Orthopedic Group Inc.	Occupation Market Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Jeffery S Lutz		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 7
Mailing Address 100 Shannon Road		Transaction ID: 70709.C540
City State Zip Code Lafayette LA 70503	Amount of Each Receipt this Period 65.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Hanger Orthopedic Group Inc.	Occupation Market Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	195.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 60 / 102						
	(check only one)							
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Jeffery S Lutz		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7	
Mailing Address 100 Shannon Road		<b>Transaction ID:</b> 70709.C638	
City State Zip Code Lafayette LA 70503	Amount of Each Receipt this Period 65.00		
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Hanger Orthopedic Group Inc.	Occupation Market Leader		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 455.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Jeffery S Lutz		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 8 / 2 0 0 7	
Mailing Address 100 Shannon Road		<b>Transaction ID:</b> 70709.C727	
City State Zip Code Lafayette LA 70503	Amount of Each Receipt this Period 65.00		
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Hanger Orthopedic Group Inc.	Occupation Market Leader		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 520.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Jeffery S Lutz		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 2 / 2 0 0 7	
Mailing Address 100 Shannon Road		<b>Transaction ID:</b> 70709.C817	
City State Zip Code Lafayette LA 70503	Amount of Each Receipt this Period 65.00		
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Hanger Orthopedic Group Inc.	Occupation Market Leader		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 585.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	195.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 61 / 102						
	(check only one)							
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

Full Name (Last, First, Middle Initial) <b>A.</b> George E McHenry		Date of Receipt M M / D D / Y Y Y Y 03 / 02 / 2007	
Mailing Address 25205 Bonny Brook Lane		<b>Transaction ID:</b> 70709.C135	
City State Zip Code Gaithersburg MD 20882	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Hanger Orthopedic Group Inc.	Occupation Vice President & CFO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00		

Full Name (Last, First, Middle Initial) <b>B.</b> George E McHenry		Date of Receipt M M / D D / Y Y Y Y 03 / 16 / 2007	
Mailing Address 25205 Bonny Brook Lane		<b>Transaction ID:</b> 70709.C218	
City State Zip Code Gaithersburg MD 20882	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Hanger Orthopedic Group Inc.	Occupation Vice President & CFO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00		

Full Name (Last, First, Middle Initial) <b>C.</b> George E McHenry		Date of Receipt M M / D D / Y Y Y Y 03 / 30 / 2007	
Mailing Address 25205 Bonny Brook Lane		<b>Transaction ID:</b> 70709.C298	
City State Zip Code Gaithersburg MD 20882	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Hanger Orthopedic Group Inc.	Occupation Vice President & CFO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 / 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

Full Name (Last, First, Middle Initial) <b>A.</b> George E McHenry		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 7
Mailing Address 25205 Bonny Brook Lane		Transaction ID: 70709.C378
City State Zip Code Gaithersburg MD 20882	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer Hanger Orthopedic Group Inc.	Occupation Vice President & CFO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>B.</b> George E McHenry		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 7
Mailing Address 25205 Bonny Brook Lane		Transaction ID: 70709.C543
City State Zip Code Gaithersburg MD 20882	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer Hanger Orthopedic Group Inc.	Occupation Vice President & CFO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C.</b> George E McHenry		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 7
Mailing Address 25205 Bonny Brook Lane		Transaction ID: 70709.C544
City State Zip Code Gaithersburg MD 20882	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer Hanger Orthopedic Group Inc.	Occupation Vice President & CFO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 / 102
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

Full Name (Last, First, Middle Initial) <b>A.</b> George E McHenry		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 7	
Mailing Address 25205 Bonny Brook Lane		<b>Transaction ID:</b> 70709.C640	
City State Zip Code Gaithersburg MD 20882	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer Hanger Orthopedic Group Inc.	Occupation Vice President & CFO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00		

Full Name (Last, First, Middle Initial) <b>B.</b> George E McHenry		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 8 / 2 0 0 7	
Mailing Address 25205 Bonny Brook Lane		<b>Transaction ID:</b> 70709.C729	
City State Zip Code Gaithersburg MD 20882	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer Hanger Orthopedic Group Inc.	Occupation Vice President & CFO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00		

Full Name (Last, First, Middle Initial) <b>C.</b> George E McHenry		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 2 / 2 0 0 7	
Mailing Address 25205 Bonny Brook Lane		<b>Transaction ID:</b> 70709.C819	
City State Zip Code Gaithersburg MD 20882	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer Hanger Orthopedic Group Inc.	Occupation Vice President & CFO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 / 102
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

Full Name (Last, First, Middle Initial) <b>A.</b> David E Osborne		Date of Receipt M M / D D / Y Y Y Y 03 / 02 / 2007	
Mailing Address 9206 Kopachuck Drive NW		Transaction ID: 70709.C125	
City State Zip Code Gig Harbor WA 98335	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Hanger Orthopedic Group Inc.	Occupation Market Leader	Aggregate Year-to-Date ▼ 50.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B.</b> David E Osborne		Date of Receipt M M / D D / Y Y Y Y 03 / 16 / 2007	
Mailing Address 9206 Kopachuck Drive NW		Transaction ID: 70709.C207	
City State Zip Code Gig Harbor WA 98335	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Hanger Orthopedic Group Inc.	Occupation Market Leader	Aggregate Year-to-Date ▼ 100.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C.</b> David E Osborne		Date of Receipt M M / D D / Y Y Y Y 03 / 30 / 2007	
Mailing Address 9206 Kopachuck Drive NW		Transaction ID: 70709.C287	
City State Zip Code Gig Harbor WA 98335	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Hanger Orthopedic Group Inc.	Occupation Market Leader	Aggregate Year-to-Date ▼ 150.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	150.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 / 102
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

Full Name (Last, First, Middle Initial) <b>A.</b> David E Osborne		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 7
Mailing Address 9206 Kopachuck Drive NW		Transaction ID: 70709.C367
City State Zip Code Gig Harbor WA 98335	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Hanger Orthopedic Group Inc.	Occupation Market Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00	

Full Name (Last, First, Middle Initial) <b>B.</b> David E Osborne		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 7 / 2 0 0 7
Mailing Address 9206 Kopachuck Drive NW		Transaction ID: 70709.C521
City State Zip Code Gig Harbor WA 98335	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Hanger Orthopedic Group Inc.	Occupation Market Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C.</b> David E Osborne		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 7
Mailing Address 9206 Kopachuck Drive NW		Transaction ID: 70709.C522
City State Zip Code Gig Harbor WA 98335	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Hanger Orthopedic Group Inc.	Occupation Market Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	150.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 / 102
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

Full Name (Last, First, Middle Initial) <b>A. David E Osborne</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7	
Mailing Address 9206 Kopachuck Drive NW		<b>Transaction ID: 70709.C628</b>	
City State Zip Code Gig Harbor WA 98335	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Hanger Orthopedic Group Inc.	Occupation Market Leader	Aggregate Year-to-Date ▼ 350.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. David E Osborne</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 8 / 2 0 0 7	
Mailing Address 9206 Kopachuck Drive NW		<b>Transaction ID: 70709.C717</b>	
City State Zip Code Gig Harbor WA 98335	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Hanger Orthopedic Group Inc.	Occupation Market Leader	Aggregate Year-to-Date ▼ 400.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. David E Osborne</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 2 / 2 0 0 7	
Mailing Address 9206 Kopachuck Drive NW		<b>Transaction ID: 70709.C807</b>	
City State Zip Code Gig Harbor WA 98335	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Hanger Orthopedic Group Inc.	Occupation Market Leader	Aggregate Year-to-Date ▼ 450.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	150.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 / 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

**A.** Full Name (Last, First, Middle Initial)  
Jason Owen

Mailing Address 3095 Rock Manor Way

City State Zip Code  
Buford GA 30519

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group, Inc.

Occupation  
Market Leader, Mid-Atlantic

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  
MM / DD / YYYY  
02 / 28 / 2007

Transaction ID: 70709.C141

Amount of Each Receipt this Period  
1500.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Hugh J Panton

Mailing Address 17 Island Road

City State Zip Code  
Sewalls Point FL 34996

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group Inc.

Occupation  
Associate Market Leader

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
50.00

Date of Receipt  
MM / DD / YYYY  
03 / 02 / 2007

Transaction ID: 70709.C126

Amount of Each Receipt this Period  
50.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Hugh J Panton

Mailing Address 17 Island Road

City State Zip Code  
Sewalls Point FL 34996

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group Inc.

Occupation  
Associate Market Leader

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
100.00

Date of Receipt  
MM / DD / YYYY  
03 / 16 / 2007

Transaction ID: 70709.C208

Amount of Each Receipt this Period  
50.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1600.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 / 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

**A.** Full Name (Last, First, Middle Initial)  
Hugh J Panton

Mailing Address 17 Island Road

City State Zip Code  
Sewalls Point FL 34996

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group Inc.

Occupation  
Associate Market Leader

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
150.00

Date of Receipt  
MM / DD / YYYY  
03 / 30 / 2007

Transaction ID: 70709.C288

Amount of Each Receipt this Period  
50.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Hugh J Panton

Mailing Address 17 Island Road

City State Zip Code  
Sewalls Point FL 34996

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group Inc.

Occupation  
Associate Market Leader

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
200.00

Date of Receipt  
MM / DD / YYYY  
04 / 13 / 2007

Transaction ID: 70709.C368

Amount of Each Receipt this Period  
50.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Hugh J Panton

Mailing Address 17 Island Road

City State Zip Code  
Sewalls Point FL 34996

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group Inc.

Occupation  
Associate Market Leader

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
04 / 27 / 2007

Transaction ID: 70709.C523

Amount of Each Receipt this Period  
50.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	150.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 / 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Hugh J Panton		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 1 / 2 0 0 7	
Mailing Address 17 Island Road		Transaction ID: 70709.C524	
City State Zip Code Sewalls Point FL 34996		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Hanger Orthopedic Group Inc.	Occupation Associate Market Leader		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Hugh J Panton		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7	
Mailing Address 17 Island Road		Transaction ID: 70709.C629	
City State Zip Code Sewalls Point FL 34996		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Hanger Orthopedic Group Inc.	Occupation Associate Market Leader		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Hugh J Panton		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 8 / 2 0 0 7	
Mailing Address 17 Island Road		Transaction ID: 70709.C718	
City State Zip Code Sewalls Point FL 34996		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Hanger Orthopedic Group Inc.	Occupation Associate Market Leader		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	150.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 / 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Hugh J Panton		Date of Receipt M M / D D / Y Y Y Y 06 / 22 / 2007	
Mailing Address 17 Island Road		<b>Transaction ID:</b> 70709.C808	
City State Zip Code Sewalls Point FL 34996		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Hanger Orthopedic Group Inc.		Occupation Associate Market Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 450.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Ambrose R Phillips		Date of Receipt M M / D D / Y Y Y Y 03 / 02 / 2007	
Mailing Address 14509 Clover Hill Terrace		<b>Transaction ID:</b> 70709.C111	
City State Zip Code Bowie MD 20720		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Hanger Orthopedic Group Inc.		Occupation Director, Treasury	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 25.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Ambrose R Phillips		Date of Receipt M M / D D / Y Y Y Y 03 / 16 / 2007	
Mailing Address 14509 Clover Hill Terrace		<b>Transaction ID:</b> 70709.C191	
City State Zip Code Bowie MD 20720		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Hanger Orthopedic Group Inc.		Occupation Director, Treasury	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 50.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	100.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 / 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Ambrose R Phillips		Date of Receipt M M / D D / Y Y Y Y Y 03 / 30 / 2007	
Mailing Address 14509 Clover Hill Terrace		Transaction ID: 70709.C271	
City State Zip Code Bowie MD 20720		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Hanger Orthopedic Group Inc.		Occupation Director, Treasury	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 75.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Ambrose R Phillips		Date of Receipt M M / D D / Y Y Y Y Y 04 / 13 / 2007	
Mailing Address 14509 Clover Hill Terrace		Transaction ID: 70709.C350	
City State Zip Code Bowie MD 20720		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Hanger Orthopedic Group Inc.		Occupation Director, Treasury	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 100.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Ambrose R Phillips		Date of Receipt M M / D D / Y Y Y Y Y 04 / 27 / 2007	
Mailing Address 14509 Clover Hill Terrace		Transaction ID: 70709.C487	
City State Zip Code Bowie MD 20720		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Hanger Orthopedic Group Inc.		Occupation Director, Treasury	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 125.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	75.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 / 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

**A.** Full Name (Last, First, Middle Initial)  
Ambrose R Phillips

Mailing Address 14509 Clover Hill Terrace

City State Zip Code  
Bowie MD 20720

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group Inc.

Occupation  
Director, Treasury

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
150.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 1 / 2 0 0 7

Transaction ID: 70709.C488

Amount of Each Receipt this Period  
25.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Ambrose R Phillips

Mailing Address 14509 Clover Hill Terrace

City State Zip Code  
Bowie MD 20720

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group Inc.

Occupation  
Director, Treasury

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
175.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 5 / 2 0 0 7

Transaction ID: 70709.C610

Amount of Each Receipt this Period  
25.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Ambrose R Phillips

Mailing Address 14509 Clover Hill Terrace

City State Zip Code  
Bowie MD 20720

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group Inc.

Occupation  
Director, Treasury

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
200.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 0 8 / 2 0 0 7

Transaction ID: 70709.C699

Amount of Each Receipt this Period  
25.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	75.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 / 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Ambrose R Phillips		Date of Receipt M M / D D / Y Y Y Y 06 / 22 / 2007	
Mailing Address 14509 Clover Hill Terrace		Transaction ID: 70709.C789	
City State Zip Code Bowie MD 20720	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Hanger Orthopedic Group Inc.	Occupation Director, Treasury		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

Full Name (Last, First, Middle Initial) <b>B.</b> John J Rush		Date of Receipt M M / D D / Y Y Y Y 03 / 02 / 2007	
Mailing Address 11419 Patriot Lane		Transaction ID: 70709.C136	
City State Zip Code Potomac MD 20854	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Hanger Orthopedic Group Inc.	Occupation Chief Medical Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00		

Full Name (Last, First, Middle Initial) <b>C.</b> John J Rush		Date of Receipt M M / D D / Y Y Y Y 03 / 16 / 2007	
Mailing Address 11419 Patriot Lane		Transaction ID: 70709.C219	
City State Zip Code Potomac MD 20854	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Hanger Orthopedic Group Inc.	Occupation Chief Medical Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	225.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 / 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

Full Name (Last, First, Middle Initial) <b>A.</b> John J Rush		Date of Receipt M M / D D / Y Y Y Y 03 / 30 / 2007
Mailing Address 11419 Patriot Lane		Transaction ID: 70709.C299
City State Zip Code Potomac MD 20854	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Hanger Orthopedic Group Inc.	Occupation Chief Medical Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B.</b> John J Rush		Date of Receipt M M / D D / Y Y Y Y 04 / 13 / 2007
Mailing Address 11419 Patriot Lane		Transaction ID: 70709.C379
City State Zip Code Potomac MD 20854	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Hanger Orthopedic Group Inc.	Occupation Chief Medical Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>C.</b> John J Rush		Date of Receipt M M / D D / Y Y Y Y 04 / 27 / 2007
Mailing Address 11419 Patriot Lane		Transaction ID: 70709.C545
City State Zip Code Potomac MD 20854	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Hanger Orthopedic Group Inc.	Occupation Chief Medical Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 / 102
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

Full Name (Last, First, Middle Initial) <b>A.</b> John J Rush		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 7
Mailing Address 11419 Patriot Lane		Transaction ID: 70709.C546
City State Zip Code Potomac MD 20854		Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Hanger Orthopedic Group Inc.	Occupation Chief Medical Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) <b>B.</b> John J Rush		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 7
Mailing Address 11419 Patriot Lane		Transaction ID: 70709.C641
City State Zip Code Potomac MD 20854		Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Hanger Orthopedic Group Inc.	Occupation Chief Medical Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	

Full Name (Last, First, Middle Initial) <b>C.</b> John J Rush		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 8 / 2 0 0 7
Mailing Address 11419 Patriot Lane		Transaction ID: 70709.C730
City State Zip Code Potomac MD 20854		Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Hanger Orthopedic Group Inc.	Occupation Chief Medical Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 / 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

**A.** Full Name (Last, First, Middle Initial)  
John J Rush

Mailing Address 11419 Patriot Lane

City State Zip Code  
Potomac MD 20854

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group Inc.

Occupation  
Chief Medical Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
900.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 22 / 2007

Transaction ID: 70709.C820

Amount of Each Receipt this Period  
100.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Ivan R Sabel

Mailing Address 4819 Quebec Street NW

City State Zip Code  
Washington DC 20016

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group Inc.

Occupation  
Chief Executive Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
100.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 02 / 2007

Transaction ID: 70709.C137

Amount of Each Receipt this Period  
100.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Ivan R Sabel

Mailing Address 4819 Quebec Street NW

City State Zip Code  
Washington DC 20016

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group Inc.

Occupation  
Chief Executive Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
200.00

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 16 / 2007

Transaction ID: 70709.C220

Amount of Each Receipt this Period  
100.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	300.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 / 102
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Ivan R Sabel		Date of Receipt M M / D D / Y Y Y Y 03 / 30 / 2007
Mailing Address 4819 Quebec Street NW		Transaction ID: 70709.C300
City State Zip Code Washington DC 20016	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Hanger Orthopedic Group Inc.	Occupation Chief Executive Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Ivan R Sabel		Date of Receipt M M / D D / Y Y Y Y 04 / 13 / 2007
Mailing Address 4819 Quebec Street NW		Transaction ID: 70709.C380
City State Zip Code Washington DC 20016	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Hanger Orthopedic Group Inc.	Occupation Chief Executive Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Ivan R Sabel		Date of Receipt M M / D D / Y Y Y Y 04 / 27 / 2007
Mailing Address 4819 Quebec Street NW		Transaction ID: 70709.C547
City State Zip Code Washington DC 20016	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Hanger Orthopedic Group Inc.	Occupation Chief Executive Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 / 102		
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Ivan R Sabel		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 7
Mailing Address 4819 Quebec Street NW		Transaction ID: 70709.C548
City State Zip Code Washington DC 20016	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Hanger Orthopedic Group Inc.	Occupation Chief Executive Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Ivan R Sabel		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 7
Mailing Address 4819 Quebec Street NW		Transaction ID: 70709.C642
City State Zip Code Washington DC 20016	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Hanger Orthopedic Group Inc.	Occupation Chief Executive Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Ivan R Sabel		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 8 / 2 0 0 7
Mailing Address 4819 Quebec Street NW		Transaction ID: 70709.C731
City State Zip Code Washington DC 20016	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Hanger Orthopedic Group Inc.	Occupation Chief Executive Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 / 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

**A.** Full Name (Last, First, Middle Initial)  
Ivan R Sabel

Mailing Address 4819 Quebec Street NW

City State Zip Code  
Washington DC 20016

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group Inc.

Occupation  
Chief Executive Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
900.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 22 / 2007

Transaction ID: 70709.C821

Amount of Each Receipt this Period  
100.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Michael L Schlesinger

Mailing Address 830 Riverhaven Drive

City State Zip Code  
Suwanee GA 30024

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group Inc.

Occupation  
Vice President, M&A

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
50.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 02 / 2007

Transaction ID: 70709.C127

Amount of Each Receipt this Period  
50.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Michael L Schlesinger

Mailing Address 830 Riverhaven Drive

City State Zip Code  
Suwanee GA 30024

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group Inc.

Occupation  
Vice President, M&A

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
100.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 16 / 2007

Transaction ID: 70709.C209

Amount of Each Receipt this Period  
50.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	200.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 / 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

**A.** Full Name (Last, First, Middle Initial)  
Michael L Schlesinger

Mailing Address 830 Riverhaven Drive

City State Zip Code  
Suwanee GA 30024

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group Inc.

Occupation  
Vice President, M&A

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
150.00

Date of Receipt  
MM / DD / YYYY  
03 / 30 / 2007

Transaction ID: 70709.C289

Amount of Each Receipt this Period  
50.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Michael L Schlesinger

Mailing Address 830 Riverhaven Drive

City State Zip Code  
Suwanee GA 30024

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group Inc.

Occupation  
Vice President, M&A

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
200.00

Date of Receipt  
MM / DD / YYYY  
04 / 13 / 2007

Transaction ID: 70709.C369

Amount of Each Receipt this Period  
50.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Michael L Schlesinger

Mailing Address 830 Riverhaven Drive

City State Zip Code  
Suwanee GA 30024

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group Inc.

Occupation  
Vice President, M&A

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
04 / 27 / 2007

Transaction ID: 70709.C525

Amount of Each Receipt this Period  
50.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	150.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	



# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 / 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

**A.** Full Name (Last, First, Middle Initial)  
Michael L Schlesinger

Mailing Address 830 Riverhaven Drive

City State Zip Code  
Suwanee GA 30024

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group Inc.

Occupation  
Vice President, M&A

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 1 1 / 2 0 0 7

Transaction ID: 70709.C526

Amount of Each Receipt this Period  
50.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Michael L Schlesinger

Mailing Address 830 Riverhaven Drive

City State Zip Code  
Suwanee GA 30024

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group Inc.

Occupation  
Vice President, M&A

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 5 / 2 5 / 2 0 0 7

Transaction ID: 70709.C630

Amount of Each Receipt this Period  
50.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Michael L Schlesinger

Mailing Address 830 Riverhaven Drive

City State Zip Code  
Suwanee GA 30024

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group Inc.

Occupation  
Vice President, M&A

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 6 / 0 8 / 2 0 0 7

Transaction ID: 70709.C719

Amount of Each Receipt this Period  
50.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	150.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 / 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

**A.** Full Name (Last, First, Middle Initial)  
Michael L Schlesinger

Mailing Address 830 Riverhaven Drive

City State Zip Code  
Suwanee GA 30024

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group Inc.

Occupation  
Vice President, M&A

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  
MM / DD / YYYY  
06 / 22 / 2007

Transaction ID: 70709.C809

Amount of Each Receipt this Period  
50.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Kirby G Shelton

Mailing Address 10020 Gramercy

City State Zip Code  
Oklahoma City OK 73139

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group Inc.

Occupation  
Associate Market Leader

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
50.00

Date of Receipt  
MM / DD / YYYY  
03 / 02 / 2007

Transaction ID: 70709.C128

Amount of Each Receipt this Period  
50.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Kirby G Shelton

Mailing Address 10020 Gramercy

City State Zip Code  
Oklahoma City OK 73139

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group Inc.

Occupation  
Associate Market Leader

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
100.00

Date of Receipt  
MM / DD / YYYY  
03 / 16 / 2007

Transaction ID: 70709.C210

Amount of Each Receipt this Period  
50.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	150.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 / 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Kirby G Shelton		Date of Receipt M M / D D / Y Y Y Y 03 / 30 / 2007
Mailing Address 10020 Gramercy		<b>Transaction ID:</b> 70709.C290
City State Zip Code Oklahoma City OK 73139	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer Hanger Orthopedic Group Inc.	Occupation Associate Market Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 150.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Kirby G Shelton		Date of Receipt M M / D D / Y Y Y Y 04 / 13 / 2007
Mailing Address 10020 Gramercy		<b>Transaction ID:</b> 70709.C370
City State Zip Code Oklahoma City OK 73139	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer Hanger Orthopedic Group Inc.	Occupation Associate Market Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Kirby G Shelton		Date of Receipt M M / D D / Y Y Y Y 04 / 27 / 2007
Mailing Address 10020 Gramercy		<b>Transaction ID:</b> 70709.C527
City State Zip Code Oklahoma City OK 73139	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer Hanger Orthopedic Group Inc.	Occupation Associate Market Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	150.00
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 / 102
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Kirby G Shelton		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 7
Mailing Address 10020 Gramercy		Transaction ID: 70709.C528
City State Zip Code Oklahoma City OK 73139	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Hanger Orthopedic Group Inc.	Occupation Associate Market Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Kirby G Shelton		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 7
Mailing Address 10020 Gramercy		Transaction ID: 70709.C631
City State Zip Code Oklahoma City OK 73139	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Hanger Orthopedic Group Inc.	Occupation Associate Market Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Kirby G Shelton		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 8 / 2 0 0 7
Mailing Address 10020 Gramercy		Transaction ID: 70709.C720
City State Zip Code Oklahoma City OK 73139	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt
Name of Employer Hanger Orthopedic Group Inc.	Occupation Associate Market Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	150.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 / 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

**A.** Full Name (Last, First, Middle Initial)  
Kirby G Shelton

Mailing Address 10020 Gramercy

City State Zip Code  
Oklahoma City OK 73139

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group Inc.

Occupation  
Associate Market Leader

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
06 / 22 / 2007

Transaction ID: 70709.C810

Amount of Each Receipt this Period  
50.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Robert T Simms

Mailing Address 159 Ash St

City State Zip Code  
Lake Zurich IL 60047

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group Inc.

Occupation  
Director, Inventory Control

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
50.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 02 / 2007

Transaction ID: 70709.C129

Amount of Each Receipt this Period  
50.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Robert T Simms

Mailing Address 159 Ash St

City State Zip Code  
Lake Zurich IL 60047

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group Inc.

Occupation  
Director, Inventory Control

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
100.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 16 / 2007

Transaction ID: 70709.C211

Amount of Each Receipt this Period  
50.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	150.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 / 102
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Robert T Simms		Date of Receipt M M / D D / Y Y Y Y Y 03 / 30 / 2007	
Mailing Address 159 Ash St		<b>Transaction ID:</b> 70709.C291	
City State Zip Code Lake Zurich IL 60047		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Hanger Orthopedic Group Inc.		Occupation Director, Inventory Control	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 150.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Robert T Simms		Date of Receipt M M / D D / Y Y Y Y Y 04 / 13 / 2007	
Mailing Address 159 Ash St		<b>Transaction ID:</b> 70709.C371	
City State Zip Code Lake Zurich IL 60047		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Hanger Orthopedic Group Inc.		Occupation Director, Inventory Control	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 200.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Robert T Simms		Date of Receipt M M / D D / Y Y Y Y Y 04 / 27 / 2007	
Mailing Address 159 Ash St		<b>Transaction ID:</b> 70709.C529	
City State Zip Code Lake Zurich IL 60047		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Hanger Orthopedic Group Inc.		Occupation Director, Inventory Control	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	150.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	50.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 / 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Robert T Simms		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 1 / 2 0 0 7	
Mailing Address 159 Ash St		<b>Transaction ID:</b> 70709.C530	
City State Zip Code Lake Zurich IL 60047		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Hanger Orthopedic Group Inc.		Occupation Director, Inventory Control	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Robert T Simms		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7	
Mailing Address 159 Ash St		<b>Transaction ID:</b> 70709.C632	
City State Zip Code Lake Zurich IL 60047		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Hanger Orthopedic Group Inc.		Occupation Director, Inventory Control	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Robert T Simms		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 8 / 2 0 0 7	
Mailing Address 159 Ash St		<b>Transaction ID:</b> 70709.C721	
City State Zip Code Lake Zurich IL 60047		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Hanger Orthopedic Group Inc.		Occupation Director, Inventory Control	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	150.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 / 102
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Robert T Simms Mailing Address 159 Ash St City State Zip Code Lake Zurich IL 60047 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 22 / 2007 <b>Transaction ID: 70709.C811</b> Amount of Each Receipt this Period 50.00 Receipt
Name of Employer Hanger Orthopedic Group Inc. Occupation Director, Inventory Control Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00		

<b>B.</b> Full Name (Last, First, Middle Initial) Richmond L Taylor Mailing Address 23848 Skyline Dr. City State Zip Code Mission Viejo CA 92692 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 02 / 2007 <b>Transaction ID: 70709.C130</b> Amount of Each Receipt this Period 50.00 Receipt
Name of Employer Hanger Orthopedic Group Inc. Occupation President, HPO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 50.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Richmond L Taylor Mailing Address 23848 Skyline Dr. City State Zip Code Mission Viejo CA 92692 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y 03 / 16 / 2007 <b>Transaction ID: 70709.C212</b> Amount of Each Receipt this Period 50.00 Receipt
Name of Employer Hanger Orthopedic Group Inc. Occupation President, HPO Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 100.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	150.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 / 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Richmond L Taylor		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 0 / 2 0 0 7	
Mailing Address 23848 Skyline Dr.		Transaction ID: 70709.C292	
City State Zip Code Mission Viejo CA 92692		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Hanger Orthopedic Group Inc.		Occupation President, HPO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 150.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Richmond L Taylor		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 3 / 2 0 0 7	
Mailing Address 23848 Skyline Dr.		Transaction ID: 70709.C372	
City State Zip Code Mission Viejo CA 92692		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Hanger Orthopedic Group Inc.		Occupation President, HPO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 200.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Richmond L Taylor		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 7 / 2 0 0 7	
Mailing Address 23848 Skyline Dr.		Transaction ID: 70709.C531	
City State Zip Code Mission Viejo CA 92692		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Hanger Orthopedic Group Inc.		Occupation President, HPO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	150.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 / 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Richmond L Taylor		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 1 / 2 0 0 7	
Mailing Address 23848 Skyline Dr.		Transaction ID: 70709.C532	
City State Zip Code Mission Viejo CA 92692		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Hanger Orthopedic Group Inc.		Occupation President, HPO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Richmond L Taylor		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 5 / 2 0 0 7	
Mailing Address 23848 Skyline Dr.		Transaction ID: 70709.C634	
City State Zip Code Mission Viejo CA 92692		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Hanger Orthopedic Group Inc.		Occupation President, HPO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Richmond L Taylor		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 8 / 2 0 0 7	
Mailing Address 23848 Skyline Dr.		Transaction ID: 70709.C723	
City State Zip Code Mission Viejo CA 92692		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		Receipt	
Name of Employer Hanger Orthopedic Group Inc.		Occupation President, HPO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	150.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 / 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Richmond L Taylor		Date of Receipt M M / D D / Y Y Y Y Y 06 / 22 / 2007	
Mailing Address 23848 Skyline Dr.		Transaction ID: 70709.C813	
City State Zip Code Mission Viejo CA 92692		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Hanger Orthopedic Group Inc.		Occupation President, HPO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Albert P Teoli		Date of Receipt M M / D D / Y Y Y Y Y 03 / 16 / 2007	
Mailing Address 7610 St. Marlo Country Club Pk		Transaction ID: 70709.C213	
City State Zip Code Duluth GA 30097		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Hanger Orthopedic Group Inc.		Occupation Associate Market Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 50.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Albert P Teoli		Date of Receipt M M / D D / Y Y Y Y Y 03 / 30 / 2007	
Mailing Address 7610 St. Marlo Country Club Pk		Transaction ID: 70709.C293	
City State Zip Code Duluth GA 30097		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Hanger Orthopedic Group Inc.		Occupation Associate Market Leader	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 100.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	150.00
<b>TOTAL</b> This Period (last page this line number only) .....	(Empty box)

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 92 / 102
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Albert P Teoli		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 1 3 / 2 0 0 7
Mailing Address 7610 St. Marlo Country Club Pk		<b>Transaction ID:</b> 70709.C373
City State Zip Code Duluth GA 30097	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 50.00
Name of Employer Hanger Orthopedic Group Inc.	Occupation Associate Market Leader	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 150.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Albert P Teoli		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 7 / 2 0 0 7
Mailing Address 7610 St. Marlo Country Club Pk		<b>Transaction ID:</b> 70709.C533
City State Zip Code Duluth GA 30097	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 50.00
Name of Employer Hanger Orthopedic Group Inc.	Occupation Associate Market Leader	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Albert P Teoli		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 1 / 2 0 0 7
Mailing Address 7610 St. Marlo Country Club Pk		<b>Transaction ID:</b> 70709.C534
City State Zip Code Duluth GA 30097	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 50.00
Name of Employer Hanger Orthopedic Group Inc.	Occupation Associate Market Leader	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	150.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 / 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Albert P Teoli		Date of Receipt MM / DD / YYYY 05 / 25 / 2007
Mailing Address 7610 St. Marlo Country Club Pk		<b>Transaction ID:</b> 70709.C635
City Duluth	State GA	Zip Code 30097
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 50.00
Name of Employer Hanger Orthopedic Group Inc.	Occupation Associate Market Leader	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Albert P Teoli		Date of Receipt MM / DD / YYYY 06 / 08 / 2007
Mailing Address 7610 St. Marlo Country Club Pk		<b>Transaction ID:</b> 70709.C724
City Duluth	State GA	Zip Code 30097
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 50.00
Name of Employer Hanger Orthopedic Group Inc.	Occupation Associate Market Leader	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Albert P Teoli		Date of Receipt MM / DD / YYYY 06 / 22 / 2007
Mailing Address 7610 St. Marlo Country Club Pk		<b>Transaction ID:</b> 70709.C814
City Duluth	State GA	Zip Code 30097
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 50.00
Name of Employer Hanger Orthopedic Group Inc.	Occupation Associate Market Leader	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	150.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 / 102
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Rhonda Turner		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 9 / 2 0 0 7	
Mailing Address 3262 Westheimer Ste 524		Transaction ID: 70709.C145	
City State Zip Code Houston TX 77098	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer The Prosthetic Center	Occupation President/CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Brian A Wheeler		Date of Receipt M M / D D / Y Y Y Y 0 3 / 0 2 / 2 0 0 7	
Mailing Address 8 Hawk Road		Transaction ID: 70709.C131	
City State Zip Code Trenton NJ 08648	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer Hanger Orthopedic Group Inc.	Occupation Vice President, Human Resource		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 50.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Brian A Wheeler		Date of Receipt M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 7	
Mailing Address 8 Hawk Road		Transaction ID: 70709.C214	
City State Zip Code Trenton NJ 08648	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C	Receipt		
Name of Employer Hanger Orthopedic Group Inc.	Occupation Vice President, Human Resource		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	600.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 / 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Brian A Wheeler		Date of Receipt M M / D D / Y Y Y Y Y 03 / 30 / 2007
Mailing Address 8 Hawk Road		<b>Transaction ID:</b> 70709.C294
City State Zip Code Trenton NJ 08648	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer Hanger Orthopedic Group Inc.	Occupation Vice President, Human Resource	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 150.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Brian A Wheeler		Date of Receipt M M / D D / Y Y Y Y Y 04 / 13 / 2007
Mailing Address 8 Hawk Road		<b>Transaction ID:</b> 70709.C374
City State Zip Code Trenton NJ 08648	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer Hanger Orthopedic Group Inc.	Occupation Vice President, Human Resource	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Brian A Wheeler		Date of Receipt M M / D D / Y Y Y Y Y 04 / 27 / 2007
Mailing Address 8 Hawk Road		<b>Transaction ID:</b> 70709.C535
City State Zip Code Trenton NJ 08648	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C	Receipt	
Name of Employer Hanger Orthopedic Group Inc.	Occupation Vice President, Human Resource	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	150.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 / 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Brian A Wheeler		Date of Receipt M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 7	
Mailing Address 8 Hawk Road		Transaction ID: 70709.C536	
City State Zip Code Trenton NJ 08648		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Hanger Orthopedic Group Inc.		Occupation Vice President, Human Resource	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Brian A Wheeler		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 5 / 2 0 0 7	
Mailing Address 8 Hawk Road		Transaction ID: 70709.C636	
City State Zip Code Trenton NJ 08648		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Hanger Orthopedic Group Inc.		Occupation Vice President, Human Resource	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Brian A Wheeler		Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 8 / 2 0 0 7	
Mailing Address 8 Hawk Road		Transaction ID: 70709.C725	
City State Zip Code Trenton NJ 08648		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Hanger Orthopedic Group Inc.		Occupation Vice President, Human Resource	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	150.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	50.00



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 / 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Brian A Wheeler		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 2 / 2 0 0 7	
Mailing Address 8 Hawk Road		Transaction ID: 70709.C815	
City State Zip Code Trenton NJ 08648		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Hanger Orthopedic Group Inc.	Occupation Vice President, Human Resource		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00		

Full Name (Last, First, Middle Initial) <b>B.</b> Louis Zermeno		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 2 / 2 0 0 7	
Mailing Address 2108 Pecan Creek Drive		Transaction ID: 70709.C132	
City State Zip Code Mesquite TX 75181		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Hanger Orthopedic Group Inc.	Occupation Market Leader		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 50.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Louis Zermeno		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 6 / 2 0 0 7	
Mailing Address 2108 Pecan Creek Drive		Transaction ID: 70709.C215	
City State Zip Code Mesquite TX 75181		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. <b>C</b>		Receipt	
Name of Employer Hanger Orthopedic Group Inc.	Occupation Market Leader		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 100.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	150.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 / 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

**A.** Full Name (Last, First, Middle Initial)  
Louis Zermeno

Mailing Address 2108 Pecan Creek Drive

City State Zip Code  
Mesquite TX 75181

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group Inc.

Occupation  
Market Leader

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
150.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
03 / 30 / 2007

Transaction ID: 70709.C295

Amount of Each Receipt this Period  
50.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Louis Zermeno

Mailing Address 2108 Pecan Creek Drive

City State Zip Code  
Mesquite TX 75181

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group Inc.

Occupation  
Market Leader

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
200.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
04 / 13 / 2007

Transaction ID: 70709.C375

Amount of Each Receipt this Period  
50.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Louis Zermeno

Mailing Address 2108 Pecan Creek Drive

City State Zip Code  
Mesquite TX 75181

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group Inc.

Occupation  
Market Leader

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
04 / 27 / 2007

Transaction ID: 70709.C537

Amount of Each Receipt this Period  
50.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	150.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 / 102
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

**A.** Full Name (Last, First, Middle Initial)  
Louis Zermeno

Mailing Address 2108 Pecan Creek Drive

City State Zip Code  
Mesquite TX 75181

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group Inc.

Occupation  
Market Leader

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
05 / 11 / 2007

Transaction ID: 70709.C538

Amount of Each Receipt this Period  
50.00

Receipt

**B.** Full Name (Last, First, Middle Initial)  
Louis Zermeno

Mailing Address 2108 Pecan Creek Drive

City State Zip Code  
Mesquite TX 75181

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group Inc.

Occupation  
Market Leader

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
MM / DD / YYYY  
05 / 25 / 2007

Transaction ID: 70709.C637

Amount of Each Receipt this Period  
50.00

Receipt

**C.** Full Name (Last, First, Middle Initial)  
Louis Zermeno

Mailing Address 2108 Pecan Creek Drive

City State Zip Code  
Mesquite TX 75181

FEC ID number of contributing federal political committee. **C**

Name of Employer  
Hanger Orthopedic Group Inc.

Occupation  
Market Leader

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
MM / DD / YYYY  
06 / 08 / 2007

Transaction ID: 70709.C726

Amount of Each Receipt this Period  
50.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	150.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 100 / 102	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

**A.** Full Name (Last, First, Middle Initial)  
Louis Zermeno

Mailing Address 2108 Pecan Creek Drive

City State Zip Code  
Mesquite TX 75181

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Hanger Orthopedic Group Inc. Market Leader

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 22 / 2007

Transaction ID: 70709.C816

Amount of Each Receipt this Period  
50.00

Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	50.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	23115.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 101 / 102

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

Full Name (Last, First, Middle Initial) <b>A. Citizens For Harkin</b>		<b>Transaction ID: 70709.E2</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 0 7
Mailing Address P.O. Box 811		Amount of Each Disbursement this Period 2100.00  CONTRIBUTION
City Des Moines State IA Zip Code 50304-	Category/ Type	
Purpose of Disbursement CONTRIBUTION		
Candidate Name THOMAS RICHARD HARKIN		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Rangel for Congress</b>		<b>Transaction ID: 70709.E1</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 7 / 2 0 0 7
Mailing Address P.O. Box 5577		Amount of Each Disbursement this Period 2100.00  CONTRIBUTION
City New York State NY Zip Code 10027-	Category/ Type	
Purpose of Disbursement CONTRIBUTION		
Candidate Name CHARLES B RANGEL		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

4200.00

**TOTAL** This Period (last page this line number only) ..... ►

4200.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 102 / 102

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
Hanger Orthopedic Group Inc. PAC

**A.** Full Name (Last, First, Middle Initial)  
Citizens for Brian Feldman

Mailing Address P.O. Box 34408

City Bethesda State MD Zip Code 20827-

Purpose of Disbursement  
NON FEDERAL CONTRIBUTION

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  Primary  General  
 Other (specify) ▼

Transaction ID: 70709.E3

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	0		2	0	0	7

Amount of Each Disbursement this Period

500.00
--------

Category/ Type
-------------------

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>500.00</b>